## SCC eFile 2012 ANNUAL REPORT 212541662 **COMMONWEALTH OF VIRGINIA** STATE CORPORATION COMMISSION 1.) CORPORATION NAME: DUE DATE: 12/31/2012 SAGAMORE INSURANCE COMPANY SCC ID NO: F1199332 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 5.) STOCK INFORMATION **GLEN ALLEN, VA 23060 CLASS AUTHORIZED** COMMON 25,000 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: **HENRICO COUNTY** 4.) STATE OR COUNTRY OF INCORPORATION: IN 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1099 NORTH MERIDIAN ST. SUITE 700 CITY/ST/ZIP: INDIANAPOLIS, IN 46204 7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer. X OFFICER DIRECTOR NAME: JOSEPH J. DEVITO TITLE: **PRESIDENT** ADDRESS: 1099 NORTH MERIDIAN STREET SUITE 700 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46204 OFFICER DIRECTOR Χ NAME: GARY MILLER TITLE: **CHAIRMAN** ADDRESS: 1099 NORTH MERIDIAN STREET **STE 700** CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46204 X OFFICER DIRECTOR NAME: MARK L. BONINI TITLE: VICE PRESIDENT ADDRESS: 1099 NORTH MERIDIAN STREET SUITE 700 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46204 X OFFICER DIRECTOR NAME: HUGH CAMERON TITLE: VICE PRESIDENT 1099 NORTH MERIDIAN STREET ADDRESS: **STE 700** CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46204 X OFFICER DIRECTOR NAME: G. PATRICK CORYDON TITI F: VICE PRESIDENT ADDRESS: 1099 NORTH MERIDIAN STREET SUITE 700

INDIANAPOLIS, IN 46204

CITY/ST/ZIP/CO:

		χ OFFICER	R X	DIRECTOR
NAME:	RODGER ANTHONY	COTTRELL		J
TITLE:	VICE PRESIDENT			
ADDRESS:	1099 NORTH MERIDI	AN ST.		
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46	204		
		X OFFICER	R X	DIRECTOR
NAME:	JAMES D. ISHAM		Λ_	
TITLE:	VICE PRESIDENT			
ADDRESS:	1099 NORTH MERIDI	AN STREET		
7.551.256.	SUITE 700			
CITY/ST/ZIP/CO:		204		
	<del>`</del>	X OFFICER	R X	DIRECTOR
NAME:	JENNIE L. LAREAU	LX OF FIGER	`	BIRLOTOR
TITLE:				
ADDRESS:	VICE PRESIDENT 1099 NORTH MERIDI	AN STREET		
ADDITEGO.	SUITE 700	ANOTHELI		
CITY/ST/ZIP/CO:		204		
				INDECTOR
NIANAE.		X OFFICER	R X	DIRECTOR
NAME:	JOHN E. MITCHELL			
TITLE:	VICE PRESIDENT	ANIOTOFFT		
ADDRESS:	1099 NORTH MERIDI	AN STREET		
CITY/ST/ZIP/CO:	SUITE 700 INDIANAPOLIS, IN 46	204		
0111/01/211/00	INDIANAI OLIS, IN 40			1
		χ OFFICEF	R X	DIRECTOR
NAME:	CRAIG C MORFAS			
TITLE:	VICE PRESIDENT			
ADDRESS:	1099 NORTH MERIDI	-		
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46	204		
		χ OFFICER	R X	DIRECTOR
NAME:	THOMAS WESLEY TI	HOMPSON -		I
TITLE:	TREAS/VP			
ADDRESS:	1099 NORTH MERIDI	AN ST.		
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46	204		
		X OFFICER		DIRECTOR
NAME:	MICHAEL JAMES CA		`	BIRLOTOR
TITLE:	MICHAEL JAMES CA GEN COUN/SEC	DE .		
ADDRESS:	1099 N MERIDIAN ST	•		
CITY/ST/ZIP/CO:				
	1110171117111 0210, 111 40			1
		X OFFICER		DIRECTOR
NAME:	RON GOSHEN			
TITLE:	ASST TREASURER			
ADDRESS:	1099 NORTH MERIDI	AN STREET		
CITY/ST/ZIP/CO:	SUITE 700	2004		
0111/01/211/00	INDIANAPOLIS, IN 46			
		χ OFFICEF	₹	DIRECTOR
NAME:	STACY RENZ			-
TITLE:	VICE PRESIDENT			
ADDRESS:	1099 NORT HMERIDI	AN STREET		
CITY/ST/ZIP/CO:	SUITE 700	2004		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.				
/s/ CRAIG C MORFAS	CRAIG C MORFA	S, VICE	10/29/2	
SIGNATURE OF DIRECTOR/O			DAT	E
LISTED IN THIS REPORT PRINTED NAME AND CORPORATE TITLE				
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material				
respect with the intent that the document be delivered to the Commission for filing.				